				AL RESOURCES STRATION FORM #148	REGISTRATION NO.					
UNDERGROUND STORAGE TANK REGISTRATION FORM #148 Tanks and piping must be registered within 30 days of installation. Installation is considered complete when the tanks and piping have been covered and tightness tested. There is an additional registration fee of \$250 per tank when not registered within 30 days of installation.										
1. LOCATION OF TAN				County		County No.				
Facility Name	IX (S)			City			Zip Code			
Otos et Address (en la val d				Dhana Namahan (
Street Address (or legal d	escription)			Phone Number ()					
Type of Owner			CASHIER	FAX Number ()					
	ounty	Federal	CASIIIER	OSE ONLI						
Private or corp. S		Indian Trust Land								
2. OWNERSHIP OF TA		Laria	1							
Owner Name (Corp., Indiv	/idual, Age	ncy)								
Street Address										
City	State	Zip Code								
Oily										
Phone Number ()										
FAX Number ()										
Name of Authorized Re	presentat	ive		ANK REGISTRATION						
Street Address			Enter the total number of NEW Tanks being registered in the boxes below. For tanks with compartments, each compartment is considered a separate tank and must be included in the tank total.							
City	State	Zip Code		ne-time \$10 registration fee nk management fee of \$65 p						
Phone Number ()				tank number by the fee for	the amount du	ue for eacl	h line below.			
FAX Number ()				lumn for the total fee due						
3. OPERATOR OF TA	NKS (i o 1	05500)	DO NOT SI UPDATES	END FEES FOR OWNER	SHIP CHAN	GE or TI	ECHNICAL			
Name	INKS (i.e. ii	essee)			TANKS		FEE DUE			
				nber of tanks/compartments egistration fee.		\$10 =	\$			
Street Address			2. Number o	of tanks over 1,100 gallons	X	\$65 =	\$			
City	State	Zip Code		nk management fee. e fee [if applicable]	X	X \$250 =	\$			
Phone Number	Fax Ni	ımher	1			,	Ψ			
Thore Number	Taxiv				Total Fe	e Due	\$			
4. PREVIOUS TANK O	WNER		6. TYPE C	OF REGISTRATION						
Individual or Company Name			NEW TANK SYSTEM installed at NEW SITE							
Mailing Address			NI NI	NEW TANKS installed at site already registered						
City	State	Zip Code		ECHNICAL UPDATE - replacing product lines, leak detection uipment, or type of leak detection						
Phone Number		1	1 — 1	OWNERSHIP CHANGE						

IOWA DEPARTMENT OF NATURAL RESOURCES UNDERGROUND STORAGE TANK REGISTRATION FORM #148				Pag	e 2/6
Tank Identification Number	Tank #1	Tank #2	Tank #3	Tank #4	Tank #5
1. Status of Tank (mark {X} or date out-of-use)					
Currently in Use	[]	[]	[]	[]	[]
Temporarily Out-of -Use (Date)	/ /	/ /	/ /	/ /	/ /
2. Date of Installation month/year					
(date tank/piping covered and tightness test completed)					
3. Tank Type Residential	[]	[]	[]	[]	[]
Farm	[]	[]	[]	[]	[]
Industrial	[]	[]	[]	[]	[]
Commercial (retail sale)	[]	[]	[]	[]	[]
Other (Please Specify)					
4. Tank Capacity Tank Size in Gallons					
If the tank has compartments, fill in size Compart. #1					
and contents using the abbreviations below: Compart. #2					
(Example: 1,000G) Compart. #3					
G = Gasoline (all Types) Jet = Jet Fuel Compart. #4					
D = Diesel UO = Used Oil Compart. #5					
K = Kerosene NO = New Oil Compart. #6					
H = Hazardous Substance (Please Specify)					
O = Other (Please Specify)					
5. Substance Currently Stored in Tank.					
Gasoline (All Types)	[]	[]	[]	[]	[]
** COMPLETE THIS SECTION ONLY** Diesel	[]	[]	[]	[]	[]
IF NOT A COMPARTMENTALIZED TANK Kerosene	[]	[]	[]	[]	[]
New Oil	[]	[]	[]	[]	[]
Used Oil	[]	[]	[]	[]	[]
Jet Fuel	[]	[]	[]	[]	[]
Hazardous (Please Specify)	[]	[]	[]	[]	[]
Other (Please Specify)					
6. Tank Material and Construction -					
Tank Manufacturer:	Model:				
Are tanks anchored? Yes No If yes,	deadman	or c	concrete pa	ıd	
Steel	[]	[]	[]	[]	[]
Fiberglass Reinforced Plastic (FRP)	[]	[]	[]	[]	[]
Composite (steel clad with Fiberglass)	[]	[]	[]	[]	[]
Steel tank jacketed with plastic for interstitial space	[]	[]	[]	[]	[]
Double Wall	[]	[]	[]	[]	[]
Lined Excavation	[]	[]	[]	[]	[]
Other (Please Specify)					
7. Tank Internal Protection (steel tanks only)					
Interior Lining	[]	[]	[]		[]
Installation date	/ /	/ /	/ /	/ /	/ /
Installation Company:	Lining	g Material_		· · · · · · · · · · · · · · · · · · ·	

Tank Identification Number 8. Tank External Protection (steel tanks only) Field Installed Galvanic Field Installed Impressed Current Factory Installed Galvanic Date cathodic protection system installed (month/year) Cathodic Protection Installation Company: Coatings Factory Applied Fiberglass Reinforced Plastic (FRP) Factory Applied Fiberglass Reinforced Urethane (FRU) None Other (Please Specify) 9. Tank Leak Detection System Groundwater Monitoring Wells Vapor Monitoring Wells Double-wall Tank with Interstitial Monitoring Interstitial Monitoring with Secondary Barrier: Automatic Tank Gauging (ATG) CSLD Automatic Tank Gauging Inventory Control with Tank Tightness Testing Statistical Inventory Reconciliation (SIR): Manual Tank Gauging Other (Please Specify) For each method marked, please specify the equipment used for leak detection. This would include leak measuring device, sensing device, ATG system or SIR method. Equipment Model or SIR method Equipment Model or SIR method: For ATG, Probe Type: 10. Piping — Type, Construction and Protection Type of product delivery— Pressurized Suction Construction Fiberglass F	IOWA DEPARTMENT OF NATURAL RESOURCES UNDERGROUND STORAGE TANK REGISTRATION FORM #148							Pa	ge 3/6	
Field Installed Galvanic Field Installed Galvanic Factory Installed Galvanic Date cathodic protection system installed (month/year) Cathodic Protection Installation Company: Coatings Factory Applied Fiberglass Reinforced Plastic (FRP) Factory Applied Fiberglass Reinforced Urethane (FRU) None Other (Please Specify) 9. Tank Leak Detection System Groundwater Monitoring Wells Vapor Monitoring Wells Double-wall Tank with Interstitial Monitoring: Interstitial Monitoring with Secondary Barrier: Automatic Tank Gauging Inventory Control with Tank Tightness Testing Statistical Inventory Reconciliation (SIR): Manual Tank Gauging Other (Please Specify) For each method marked, please specify the equipment used for leak detection. This would include leak measuring device, sensing device, ATG system or SIR method. Equipment Manufacturer or SIR provider: Equipment Manufacturer or SIR method. Equipment Manufacturer or SIR provider: Equipment Manufacturer or SIR method: For ATG, Probe Type. Construction Fiberglass Flexible wall Galvanized Steel Other (describe) Piping Manufacturer: Model: Mark if it has - Double Wall External Secondary Barrier: Althodic Protection (for steel piping) - Galvanic Impressed Galvanic Interstitial Intersti	Tank Identification Number		£1	Tank 7	#2	Tank	#3	Tank #4	Tan	k 5
Field Installed Impressed Current Factory Installed Galvanic Date cathodic protection system installed (month/year) Cathodic Protection Installation Company: Coatings Factory Applied Fiberglass Reinforced Plastic (FRP) Factory Applied Fiberglass Reinforced Urethane (FRU) None Other (Please Specify) 9. Tank Leak Detection System Groundwater Monitoring Wells Vapor Monitoring Wells Vapor Monitoring Wells Ouble-wall Tank with Interstital Monitoring: Interstitial Monitoring with Secondary Barrier: Automatic Tank Gauging (ATG) CSLD Automatic Tank Gauging (ATG) Statistical Inventory Reconciliation (SIR): Manual Tank Gauging Other (Please Specify) For each method marked, please specify the equipment used for leak detection. This would include leak measuring device, sensing device, ATG system or SIR method. Equipment Manufacturer or SIR provider: Equipment Model or SIR method: For ATG, Probe Type: 10. Piping — Type, Construction and Protection Type of product delivery— Pressurized Other (describe) Piping Manufacturer: Model: Mark if it has — Double Wall External Secondary Barrier Cathodic Protection (for steel piping) - Galvanized Impressed Interstict of Interstict	8. Tank External Protection (steel tanks only)									
Factory Installed Galvanie Date cathodic protection system installed (month/year) Cathodic Protection Installation Company: Coatings Factory Applied Fiberglass Reinforced Plastic (FRP) Factory Applied Fiberglass Reinforced Plastic (FRP) Factory Applied Fiberglass Reinforced Urethane (FRU) Fiberglass Factory Applied Fiberglass Reinforced Urethane (FRU) Fiberglass Factory Applied Fiberglass Pacify Fiberglass Filexible wall Galvanized Steel Other (Described Protection Type of product delivery Fiberglass Filexible wall Galvanized Steel Other (describe) Fiping Manufacturer: Model: Mark if it has - External Secondary Barrier Cathodic Protection (for steel piping) - Galvanic Impressed Filexible Steel Filexible Steel Filexible Steel Filexible Wall Filexible Steel Filexible Wall Filexibl				[]	_[]	[]	1]
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Inventory Control with Tank Tightness Testing Statistical Inventory Reconciliation (SIR): Manual Tank Gauging Other (Please Specify) Other (Please Specify) For each method marked, please specify the equipment used for leak detection. This would include leak measuring device, sensing device, ATG system or SIR method. Equipment Manufacturer or SIR provider: Equipment Model or SIR method: For ATG, Probe Type: 10. Piping — Type, Construction and Protection Type of product delivery- Suction Construction Fiberglass Flexible wall Galvanized Steel Other (describe) Piping Manufacturer: Model: Mark if it has - Double Wall External Secondary Barrier Cathodic Protection (for steel piping) - Galvanic Impressed Galvanic Impressed		<u>Г</u> 1	J I	<u>L</u>]		1		L	1
Statistical Inventory Reconciliation (SIR): Manual Tank Gauging Other (Please Specify) For each method marked, please specify the equipment used for leak detection. This would include leak measuring device, sensing device, ATG system or SIR method. Equipment Manufacturer or SIR provider: Equipment Model or SIR method: For ATG, Probe Type: 10. Piping – Type, Construction and Protection Type of product delivery- Pressurized Suction Construction Fiberglass Flexible wall Galvanized Steel Other (describe) Piping Manufacturer: Model: Mark if it has - Double Wall External Secondary Barrier Cathodic Protection (for steel piping) - Galvanic Impressed Galvanic Impressed		[]	1	Ī]	Ī	1			1
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Equipment Model or SIR method:		k detecti	ion.	This v	voul	ld inclu	ide l	eak measu	ring	
Type of product delivery-	Equipment Manufacturer or SIR provider:									
Type of product delivery-	Equipment Model or SIR method:									
Type of product delivery- Suction Suction Suction Fiberglass Flexible wall Galvanized Steel Other (describe) Piping Manufacturer: Model: Mark if it has - External Secondary Barrier Cathodic Protection (for steel piping) - Galvanice Galvanice Galvanic Galvanic Impressed Galvanic Impressed Galvanic Impressed Galvanic Impressed Impresse	For ATG, Probe Type:									
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Flexible wall Galvanized Steel Other (describe) Piping Manufacturer: Model: Mark if it has - External Secondary Barrier Cathodic Protection (for steel piping) - Galvanic Impressed Flexible wall [] [] [] [] [] [] [] [] [] []	Suction	[]		[]	[]	[]	[]
Galvanized Steel Other (describe) Piping Manufacturer: Model: Mark if it has - External Secondary Barrier Cathodic Protection (for steel piping) - Galvanic Impressed Galvanized Steel G	Construction Fiberglass	Γ	1	Γ	1	Γ	1	[]	$\overline{\Box}$	1
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Piping Manufacturer: Model: Mark if it has - External Secondary Barrier Cathodic Protection (for steel piping) - Galvanic Impressed Impressed Impressed Impressed Impressed Impressed	Galvanized Steel]	[]	[]	[]]]
Mark if it has - Double Wall [] [] [] [] [] Cathodic Protection (for steel piping) - Galvanic [] [] [] [] [] [] [] [] [] [Other (describe)									
Mark if it has - Double Wall External Secondary Barrier Double Wall Double Wal	Piping Manufacturer:									
External Secondary Barrier Cathodic Protection (for steel piping) - Galvanic Impressed [] [] [] [] [] []	Model:									
Cathodic Protection (for steel piping) - Galvanic Impressed I I I I I I I I I I I I I I I I I I I	Mark if it has - Double Wall]]	[]	[]
Impressed [] [] [] []	External Secondary Barrier			[]	[]] [
	Cathodic Protection (for steel piping) - Galvanic	_[]	_[]	[]]
Specify external coating(if any):	<u> </u>]	[]]]
	Specify external coating(if any):									

IOWA DEPARTMENT OF NATURAL RESOURCES UNDERGROUND STORAGE TANK REGISTRATION FORM #148							1	Pag	ge 4/6	
Tank Identification Number	Tan	k #1	Tank	#2	Tank	: #3	Tank #4	4	Tank	ς 5
11. Piping Continuous Line Leak Detection										
Mechanical Line Leak Detector]	[]	[]]		
Electronic Line Leak Detector]	Ī]
Leak Detection Make:										
Model:										
								_		
12. Piping Leak Detection Annual Line Tightness Testing]]	[]]
Interstitial Monitoring of Double Wall System]	[]	[]			[]
Vapor Monitoring	[]	[]	[]			[]
Groundwater Monitoring	[]	[]	[]	[]]	[]
Statistical Inventory Reconciliation (SIR)	[]	[]	[]			[]
Name of SIR Company:										
Version of SIR Method:										
Safe Suction System (one check valve beneath dispenser)	F	7	Г	7	Г	1	F		Тг	
Other (Please Specify)	L F	<u></u>	<u> </u>	<u> </u>	L	1	L .	<u> </u> 	<u> </u>	1
Other (Fleuse Speerry)	L		L		L		L L .		L	
12 Corell Donato at an Empirement										
13. Spill Protection Equipment Spill Containment Size in Gallons										
G 111 75 1 1 2 7 6 9										
Spill Equipment Mfg.:										
Spill Equipment Model:										
14. Overfill Protection Equipment										
Automatic Shutoff Device @ Full 95%	Г	1	Г	1	Γ	1	lΓ	$\overline{1}$	Τī	$\overline{1}$
Flow Restrictor @ 90% Full (e.g., ball float valve)	Ī	i	ÌÌ	i	Ī	i	Ī		Ī	1
High Level Alarm @ 90% Full	Ī	1	Ī	1	Ī	ī	Ī	<u> </u>	ΙĪ	1
Overfill Equipment Mfg.:										
Overfill Equipment Model:										
CERTIFICATION OF		MPI	LIAN	1 C 1	E.					
15. Installation (Mark [X] all that apply)		<u> </u>		101	_					
A. The tank and piping installers certified by the tank and piping	[1	Γ	1	Г	1	Г	1	Г	1
manufacturers.	L	J	L	J	L	,	L .	<u>, </u>	Ľ	,
B. Installation inspected by a registered professional engineer with education & experience in UST installation	[]	[]	[]	[.]	[]
C. All work on the manufacturer's installation checklists was completed.	[]	[]	[]	[.]	[]
D. The installers certified or licensed by the Iowa UST Fund Board.	[]	[]	[]	[]]	[]
E. The installation inspected and approved by an inspector certified or licensed by the Iowa UST Fund Board.	[]	[]	[]	[.]	[]

IOWA DEPARTMENT OF NATURAL RESOURCES Page 5/6 UNDERGROUND STORAGE TANK REGISTRATION FORM #148 **Financial Assurance** 16. I have financial responsibility to cover pollution liability for my underground storage tanks in accordance with 567--Chapter 136 of the Iowa Administrative Code by the following method: Self-insured - tangible net worth of \$10 million and ability to pass one of the financial tests in rule 136.6 Insurance coverage through private insurance carrier meeting rule 136.8 Guarantee from corporate parent or other firm able to pass the net worth financial test in rule 136.7 Surety bond meeting rule 136.9 Letter of credit meeting rule 136.10 Trust Fund meeting rule 136.11] Combination of the above methods (please mark those methods being used) Name of Insurer: Policy No. For local governments and their agencies, the following may also be used: Local government bond rating test meeting rule 136.13 Local government financial test meeting rule 136.14 Local government guarantee meeting rule 136.15 Local government fund meeting rule 136.16 ATTACH A COPY OF YOUR FINANCIAL RESPONSIBILITY DOCUMENT Proof of financial responsibility must be maintained in order to store fuel in the tanks. You must submit a current copy of the financial assurance document such as a new certificate of pollution liability

[Installer and Owner Certification] next page

insurance or proof of self-insurance every year. If financial responsibility is not maintained, the department can stop fuel delivery. Insurance companies are required to notify the department when

insurance is being canceled.

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INSTALLER/INSPECTOR CERTIFICATION Pursuant to subrule 135.3(3)"e" the installer hereby certifies that the methods used to install the tank and piping systems comply with the requirements in subrule 135.3(1)"d".								
Print or Type Company Name	Address		ity	State				
Signature	Type or Print Signature Date Signed							
Title or Position in Company		-						
OWNER CERTIFICATION (Read and sign after completing form) I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete.								
Print or Type Name of Owner Signature of Owner Date Signed								
Print or Type Official Title of Owner								
Registration is required by Iowa law for all underground storage tanks that have been used to store regulated substances since January 1, 1974 and were still in the ground as of July 1, 1985, or tanks brought into service after July 1, 1985. The information requested is required by 567Chapter 135 of the Iowa Administrative Code (567-455B and Iowa Code Section 455B.473).								
Mail completed form, copy of financial assurance mechanism, and appropriate fee to the address below. Checks should be made out to the Iowa Department of Natural Resources.								
	wa Department of Natural Inderground Storage Tan							

Underground Storage Tank Section
502 East 9th Street
Des Moines, IA 50319-0034